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Urban District of Rothwell.

Annual Report

OF THE

MEDICAL OFFICER OF HEALTH
(HUGH STEVENSON, M.B., C.M.)

AND THE

SANITARY INSPECTOR

(T. WILSON, Cert. S.I.B.)

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Rothwell Urban District Council.

ANNUAL HEALTH REPORT.

STATISTICAL MEMORANDA FOR 1939.

Area in Acres	..	..	..	..	..	..	10,695
Resident Population (Mid-Year 1939)	..	..	..	..	..	..	24,540
Average Population appropriate to the calculation of death Rates	..	..	..	..	..	..	24,450
Number of Inhabited Houses in District at end of 1939	..	..	..	..	..	..	6,905
Rateable Value to General Rate on the 1st April, 1939	..	..	..	..	..	..	£100,897
Sum represented by a Penny Rate	..	..	..	..	..	..	£398 15s. 6d.

BIRTHS (LIVE).

Legitimate—179 Males, 146 Females	}	330
Illegitimate—3 Males, 2 Females							

STILLBIRTHS	..	7 Males, 5 Females	12
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DEATHS	..	140 Males, 117 Females	257
Birth Rate per 1,000 Population (Mid-1939)	13.44
Stillbirths Rate per 1,000 (total (live and still) births)	..	..	..	..	..	..	38.00
Death Rate per 1,000 population	..	..	..	..	..	..	10.51

							Rate per 1,000 total (Live and Still Births)	
DEATHS FROM PUERPERAL CAUSES.							Deaths.	
Puerperal Sepsis	..	..	..	..	..	0	..	0·0
Other Puerperal Causes	..	..	..	..	..	2	..	5·26
Total	..	..	..	..	..	2	..	5·26

DEATHS OF INFANTS UNDER ONE YEAR OF AGE.

All Infants per 1,000 Live Births	..	..	..	..	..	..	42.42
Legitimate Infants per 1,000 Legitimate Live Births	..	..	..	..	..	..	43.07
Illegitimate Infants per 1,000 Illegitimate Live Births	00.00

Deaths from Cancer (all ages)	31
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Deaths from Measles (all ages)	0
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Deaths from Whooping Cough (all ages)	1
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Deaths from Diarrhoea (under 2 years of age)	0
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No unusual or excessive mortality during the year.

RECORD OF DEATHS IN AGE GROUPS.

Under 1 year.	1-5 years.	5-15 years.	15-25 years.	25-45 years.	45-65 years.	Over 65 years.	Total.
14	7	3	15	24	71	123	257

STAFF OF HEALTH DEPARTMENT.

HUGH STEVENSON, M.B., C.M. ..	Medical Officer of Health. Medical Superintendent of the Rothwell Isolation Hospital. Medical Officer, Maternity and Child Welfare Services.
T. WILSON, Cert. S.I.B., M.S.I.A., Certified Meat Inspector, Certified Smoke Inspector.	Senior Sanitary Inspector and Cleansing Superintendent.
R. A. NAYLOR, Cert. S.I.B., M.S.I.A., Assoc. Inst. Hygiene	Additional Sanitary Inspector.
G. F. IDLE, Cert. S.I.B., M.S.I.A...	Additional Sanitary Inspector.
Miss M. CAMERON, State Registered Nurse, S.C.M., C.R.S.I.	Superintendent Health Visitor.
Miss E. ABRAM, Certified Midwife..	Health Visitor.
Miss G. M. HARVEY, State Registered Nurse, S.C.M., C.R.S.I.	Health Visitor (January to May, 1939, only)
Miss N. MATHER, State Registered Nurse, S.C.M., C.R.S.I.	Health Visitor (October to Dec- ember, 1939).
Miss M. WHITTINGHAM	Clerk.
Miss I. BIRBECK	Clerk (M. and C.W. Clinic).
H. T. HODGSON	Junior Clerk.

Rothwell Urban District Council

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH, 1939.

To the Chairman and Members of the

Rothwell Urban District Council.

Gentlemen,

I now beg to submit to you, for consideration, my Report on the Public Health of your District during the year ending December 31st, 1939.

My Annual Report on this occasion, is, by request of the Ministry of Health, a very abbreviated one and will be found to be one mainly statistical in character. The Report thus constituted will, never-the-less, I trust, show in substance, through the medium of detailed statistical tables, the main features of the Public Health history of this area during the year, will indicate whatever administrative policies have been in active operation and, not less eloquently, will, by their absence, stress the temporary suspension of certain branches of health administrative work which, in days gone by, loomed up prominently in such an annual survey.

To cite one instance, which may be selected at random as representative of others, namely, Housing Reform. Prior to the war, we, in this administrative area, were engaged hot-foot on the ultimate task of endowing the district, and the people living in it, with houses of a healthy, worthy and desirable standard, and, as a necessary preliminary, had already submitted to the axe large and extensive tracts of slum and degenerate property, with the accompanying provision of new houses for the tenants so evicted.

We had, however, done more:—an intensive campaign of housing inspection was in full swing and further extensive groups of slum houses, to be numbered in all by several hundreds, awaited their well-merited fate of ultimate extinction. As a matter of fact, at the moment when the “stop” edict was issued, and subsequent to the necessary preliminary inspection work of the Housing

Inspector, I, as Medical Officer of Health, had personally inspected very many such, and was on the eve of representing them to the Council for summary treatment, which, in the logical end, meant demolition, whilst no less extensive tracts of corresponding undesirables peremptorily awaited my immediate attention.

It is one of the major regrets of those direful days of to-day that such vital work, with its predominant, indeed fundamental, effect upon the lives, the health and happiness of hundreds of our families, had, perforce, to come to an abrupt, if momentary, halt, and this particular task will assuredly be not one of the least urgent and imperative to be grappled with in the happier post-war era when, in this, as in not a few other public health policies and activities, many dropped stitches will have to be taken up in all sober earnestness.

I will now endeavour to present in a somewhat sketchy and brief manner the salient features of our 1939 Public Health experiences.

MATERNITY AND CHILD WELFARE.

Fortunately, in light of present circumstances, the work and diverse activities of a Maternity and Child Welfare Service represent something which lends itself readily to tabular relation, without the aid of much accompanying commentary, and, as the need for economy of space in a Report of this kind is, at the moment, both obvious and clamant, I have accordingly prepared, and will now submit, a series of statistical tables dealing in series with many and varied aspects of this work, which should tell their respective stories in a clear, comprehensive, and readily interpretable manner.

All salient factors relative to Maternity and Child Welfare work in this district will be thus presented, and a critical and studied examination of the statistical data and other accompanient categorised tables now to be submitted should, I suggest, furnish a reasonably clear and lucid picture of the manifold happenings during the year, as represented by, say, Child Welfare and Ante-Natal Clinics, by the Home Visitation of your Health Visiting Staff, as well as by a whole miscellany of allied activities, of many and variant kinds, which jointly constitute the one great machine, with its incalculable influence upon the lives and well-being of ever succeeding generations of mothers and children—the Maternity and Child Welfare Service.

This Service, I, whose privileged right it has been to watch its development from tiny and insignificant beginning, to its present-day towering proportions, and in a humble way to be associated with the direction of its fortunes throughout, boldly assert, is, of all the many activities coming within your realm of administrative

control, not only the one which, by the sheer insistence and driving power of its own merits, has to-day elbowed its way to a position of unassailable and readily conceded supremacy and headship, but is, at the same time, one which, by virtue of its achievements and hard-won distinctions, must be to you a source of profound civic pride—and, let me add, just pride.

AN ARRESTING THOUGHT.

I put it to you in all seriousness:—can there possibly be a higher ideal to which any health governing body, endowed with all the autocratic authority and power conferred upon it, can direct its energies, than the effort to conserve and safeguard the health, the lives and well-being of young children and, inferentially, of the mothers who bear them? It must ever be remembered, although this is a truth which, from clap-trap repetition, has pretty well degenerated into a platitude and has thus been shorn of much of its true and inward significance, that the child of to-day is the man or woman of to-morrow and that, as a logical sequence, what the mother is to-day, so will the child be, and what the child is, or is permitted to be, so will be the future adult. In this sense, and to that extent, the whole future well-being of the community, entire and without exception, under your jurisdiction, is in your hands and your keeping, as, for the moment, representing those to whom that great trust has been committed. That axiom, stripped of all persiflage, and reduced to its naked essentials, is what Maternity and Child Welfare really means and signifies.

Epitome of the Year's Achievements.

As my final word, let us now see, as reflected in terms of recorded experience, to what extent, and in what manner, this most responsible of all trusts has been honoured during the past year. Very briefly it may thus be summarised:—Of a grand total of 1,737 children under five years of age in this area, an average of 224·73 were, each week, throughout the year, in clinic attendance, with a gross total of 10,923 individual visits in the 244 sessions held; that 1,016 individual children were involved in this clinic attendance; that 377 children ranked as new clinic entrants during the year, a figure equivalent to 84·1 per cent. of all notified live births during that year; that our Sunray Clinics were attended by 27·57 children and debilitated mothers per session; that a gross total of 14,842 visits were paid to homes by your Health Visiting Staff; that a total of a little under half the number of children born were breast fed throughout—a figure still definitely under the desirable standard; that, at the 52 Ante-Natal sessions held during the year at the Central Clinic, we had an average sessional attendance of 17·55, and, at the 12 sessions held in the subsidiary clinic at Methley, we had an average attendance of 6·1, the whole representing the most

gratifying and encouraging fact that, during 1939, three out of every four expectant mothers in this area attended the Ante-Natal Clinic ; that two maternal deaths occurred during the year ; that, at our various clinics, a gross total of 114 children were immunised against Diphtheria ; that, of all children born during 1939, 14 died during the currency of this year, giving us an Infantile Mortality Rate of 42.42 per 1,000 live births, as compared with a figure of 56.0 during 1938, with 68.37 in 1937 and with 57.27 in 1936 ; and that, finally, 22 children died under five years of age, equivalent to a figure of 8.5 per cent. of all notified deaths.

Add to all this a consistent and uniformly high standard of work by your Health Visiting Staff, characterised throughout by a lofty and most commendable sense of duty, and the bare history of our Maternity and Child Welfare story during the year is told.

With this brief and attenuated summary, reinforced as it is by statistical and tabular records, the story of our Maternity and Child Welfare experiences for 1939 is brought to a close and I trust it may convey, as I have already said, a reasonably clear and understandable picture of its events and happenings, even though on this occasion it must needs be a somewhat sketchy and kaleidoscopic one.

TABLE 1.
CLINIC ATTENDANCES IN AGE GROUPS SHOWING
AVERAGE WEEKLY ATTENDANCE AT FIVE CLINICS.

Clinic	Under 1 year	1-2 years	2-5 years	Total	Average Weekly Attendance
Rothwell ..	1,773	1,318	1,500	4,591	95.64
Lofthouse ..	641	494	775	1,910	39.79
Stourton ..	694	260	411	1,365	28.43
Oulton ..	635	296	371	1,302	27.12
Methley ..	835	480	440	1,755	33.73
Total ..	4,578	2,848	3,497	10,923	224.73

TABLE 1a.
INDIVIDUAL CHILDREN IN CLINIC ATTENDANCE DURING
1939.

Clinic	Under 1 year	1-2 years	2-5 years	Total
Rothwell	86	104	185	375
Lofthouse	39	50	126	215
Stourton	34	33	59	126
Oulton	44	30	80	154
Methley	43	33	70	146
Total	246	250	520	1,016

TABLE 1b.
NEW CLINIC ENTRANTS DURING 1939.

Clinic.			Under 1 year.	1-2 years.	2-5 years.	Total.
Rothwell	..	..	102	10	12	124
Lofthouse	..	..	49	14	13	76
Stourton	..	..	42	3	6	41
Oulton	..	..	46	8	11	65
Methley	..	..	53	3	5	61
Total	..	..	292*	38	47	377

* 292=84.1% of all Notified Live Births.

TABLE 2.
RECORD OF SUNRAY WORK DURING 1939.

No. of Sessions	No. of Treat- ments given	No. of individual Children treated			No. of Mothers treated	Total	Average Attendance per Session.
		Under 1 year	1-2 years	2-5 years			
68	1,875	2	28	33	24	87	27.57

NOTE.—Thirteen children attending School received 287 Treatments (in accordance with arrangement with the West Riding County Council).

TABLE 3.
**RECORD OF HOME VISITATION AND VISITS TO
TUBERCULOSIS CASES.**

First Visits (under one year)	313
Re-visits (under one year)	2,151
One to two years	2,405
Two to five years	9,249
Ante-Natal first visits	66
Ante-Natal Re-visits	192
..	
TOTAL HOME VISITS (M. & C.W.)	14,376
HOME VISITS TO TUBERCULOSIS CASES.	
First Visits to Pulmonary Cases	9
Re-visits to Pulmonary Cases	300
First Visits to Non-Pulmonary Cases	4
Re-visits to Non-Pulmonary Cases	153
TOTAL HOME VISITS (M. & C.W. and Tuberculosis) ..	
	14,842

TOTAL CLINIC SESSIONS HELD DURING 1939 :—

Infant Welfare	244
Ultra Violet Ray	68
Ante-Natal	64
Dental Sessions	4
Consultative Ante-Natal Session	1
	<hr/>
	381
	<hr/>

TABLE 4.

GRANTS OF FREE MILK : SALES OF DRIED MILK AND COD LIVER OIL.

Number of Packets of Dried Milk sold at cost price	4,256
Number of Packets of Dried Milk given gratis	709
Number of pints of Raw Milk given gratis	168
Number of ounces of Cod Liver Oil (Pure) (Sold at $\frac{1}{2}$ d. per oz.) ..	3,509
Number of ounces of Cod Liver Oil (Emulsion) (Sold at $\frac{3}{4}$ d. per oz.) ..	11,721
Number of Adexolin Capsules (Sold at 6d. for fourteen)	10,388
Number of ounces of Adexolin Liquid (Sold at 3/2 per oz.) ..	33 $\frac{1}{2}$

N.B.—In addition to the 709 packets of dried milk given gratis, 8 packets were sold at one-quarter price, 4 at one-half price and 4 at one-third price.

TABLE 5.

PARTICULARS OF INFANT FEEDING DURING 1939.

Number of Infants breast fed for 6 months or longer	185†
Number of Infants found to be Artificially Fed at First Visit	65
Further number of Infants found to be Artificially Fed at Subsequent Visits	91

† 185=45·74 per cent of Notified Births.

Methods of Feeding (Artificial).	Reasons for Discontinuation of Breast Feeding.
Cows' Milk 38	Maternal Debility 36
Dried Milk 94	Exceptional Home Circumstances .. 4
Other Proprietary Foods 24	Child admitted to Hospital .. 2
	Mother working 5
	Mastitis 4
	Death of Mother 2
	Difficulties arising from Infant
	Feebleness 6
	Puerperal Pyrexia 2
	Albuminuria 1
	Advised by Medical Attendant .. 23
	No apparent justifiable reason .. 59
<hr/>	<hr/>
156	156

RESCUE SERVICES

Hospital treatment for all emergency maternity cases.

Hospital treatment for cases in which housing conditions are undesirable.

Hospital provision (free) for all cases of Puerperal Pyrexia.

Ambulance free in all above cases.

Consultation at home with Specialist in cases of abnormalities, arising ante-natal, post-natal, or during labour.

Consultative Ante-Natal Clinic with Specialist in attendance.

Provision (free) for X-ray examination of maternity cases of dubious diagnosis.

Consultative Ophthalmic Clinic with Specialist in attendance.

Home consultation with Ophthalmic Specialist in emergency cases.

Hospital provision for cases of Ophthalmia Neonatorum.

Orthopaedic hospital provision for children under five.

Provision of dental treatment for expectant and nursing mothers.

Provision of dental treatment for children under five.

Convalescent Home treatment for debilitated children under five.

Seaside Convalescent Home provision for debilitated mothers and infants.

Child Welfare, ante-natal and post-natal Services (under our own control) with Medical and Health Visiting staff.

Immunisation (Diphtheria) Clinic.

Grants of free milk to nursing and expectant mothers.

Assisted Scheme.—Grants of dried milks and Cod Liver Oil at reduced terms in accordance with income.

Provision of Sunray treatment for debilitated children under five and for expectant Mothers.

Home Helps.

I may add that, complementary to the above provisions, Convalescent Home Treatment for debilitated women is, likewise, ensured through the medium of our Voluntary Nursing Association.

Convalescent Home Provision for Debilitated Mothers and their Infants.—During 1939 9 mothers with their infants, received benefit by being sent to the Withernsea Home for Mothers and Babies for a period of two weeks each.

Health Visitors.—Three, one being the Supervisory Head. No changes were made in this staff during 1939.

Child Life Protection.—At the end of 1939, there were three foster-mothers who were nursing children for reward in this area.

Dental Treatment for Children under Five and for Expectant and Nursing Mothers.—Under arrangement with the West Riding County Council Dental Service, the Maternity and Child Welfare Authority of this district provides dental treatment for children under five years, and likewise for expectant and nursing mothers when such treatment is deemed necessary.

Provision is made for home consultation with Ophthalmic Specialist in emergency cases, and a consultative Ophthalmic Clinic is held with Specialist in attendance. Hospital treatment is available for all cases of Ophthalmia Neonatorum.

Orthopaedic hospital provision is available for children under five.

Contributory Payments towards Bus Fares.—In the case of women attending the Ante-Natal Clinic, contributory payments are made by the Authority towards the cost of bus fares.

Nursing Homes.—No Nursing Homes have been registered in this district, and no action has been found necessary.

A TRIBUTE WELL EARNED.

Clinic Staff.—Despite curtailment of space, I feel I must find room for a brief acknowledgment of the highly efficient and meritorious manner in which Miss Cameron, the Superintendent Health Visitor, and her Staff have fulfilled their onerous and responsible duties throughout the year. They have, at all times, brought to their task a whole-hearted endeavour and devotion to duty worthy of the highest praise. Their work, under the inspiration of Miss Cameron's leadership, with her great enthusiasm and unflagging zeal, bears throughout the stamp of efficiency and conscientious service, and the mothers and young children of this area owe them a deep sense of gratitude for the unstinted efforts they have unceasingly made on their behalf.

Lady Voluntary Helpers.—Just one word of grateful thanks for the inestimable service which, in the background of comparative obscurity, as it were, those ladies have, once again, rendered to the cause of Maternity and Child Welfare in this district. They work without ostentation, ever ready to "fetch and carry," and do it, moreover, with utter and self-denying disregard of the sacrifice of personal convenience and leisure, which regular attendance at our Clinic sessions, beyond question or doubt, entails. The knowledge that by thus, so willingly and so disinterestedly, fulfilling all those arduous and manifold duties, they are filling a by no means insignificant, indeed, indispensable, niche in the general scheme of things must be their only reward and, at the same time, the only one which I am very sure they desire.

District Nurses.—In this general apportionment of thanks for services rendered, I must not omit reference to the devoted service rendered by the nurses of our Voluntary Nursing Association—those unofficial members of the Health Service. They, like those I have just paid tribute to, work unobtrusively and wholly without public display, but the value to the general community of the work thus performed needs no emphasis. To all those unfortunates who need such help and succour, their visitation is indeed a godsend. If to be at the beck and call of everyone, at all times and under all conditions, and if to minister to, and aid, those who are needy and

in distress, be the sign manual of high service, then unquestionably those nurses worthily stake their claim to such a badge. We of the Health Service can, perhaps better than most, appreciate the worth of the service they render, and it only remains for me, as the Administrative Head of that Service, to express on their behalf our most sincere and grateful thanks.

INFANT MORTALITY.

Stillbirths and Neo-natal Deaths.

During 1939, out of a total of 330 births, 14 deaths occurred, thus furnishing an Infant Mortality Rate for that year—that is the proportion of children who died before reaching the age of one year per estimated thousand live births—of 42·42, as compared with a figure of 56·0 in 1938, with 68·37 in 1937, with 57·27 in 1936 and with 58·6 in 1935.

I shall shortly submit a table recording, in detail and in age groups, the causes of those 14 under-one-year deaths, and indicating, at the same time, the age periods at which those fatalities occurred.

HISTORY REPEATS ITSELF.

An Old Story with an Old Moral.

Indeed an old story is unfolded when, as happens year after year with unbroken and wearying monotony, we again find, as related statistically in the Table in question, that the fundamental cause, by far, of those infant fatalities, is Premature Birth or some congenital debilitating agency—in other, and quite plain and unmistakable, words, that the major proportion of those infants were in such a debilitated and parlous state when born that survival for even a brief period was a well-nigh impossibility.

As convincing proof, let the Table speak for itself:—Of the 14 recorded deaths under one year, no fewer than **ten** of them, or 70 per cent. of the whole, are to be ascribed to inherent feebleness and debility at birth and, still more significant, as showing how precarious indeed was the hold upon life of those unfortunate infants, that **all** of those deaths occurred during the **first** week after birth.

It calls for no great profundity of mind to realise that, in this dire problem of infant mortality, we are dealing not with a question of a normal, healthily born infant, called upon to face what one may be permitted to call the normal—or at least, not unexpected—risks and hazards which threaten the lives and safety of every child born, but that we are dealing with something which is predestined and, therefore, so far at least as the ultimate calamitous result is concerned, inevitable. That is not for one moment to suggest that this peremptory and grim extinction of a given proportion of all

children born is a natural and, therefore, quite anticipated occurrence. What it does mean is that factors operating **before the child is born** predestine its early death subsequent to birth, or, in other words, that the child at birth is so burdened by a weight of pre-natal shortcomings and deficiencies that its survival is something well-nigh beyond the wit of man—or any Maternity and Child Welfare Service—to achieve.

We thus find ourselves, once again, confronting the old, by now almost hackneyed, problem of ante-natal fitness and, as a corollary of that, ante-natal care and supervision.

An Admonition for the Laggards.

It is, I suggest, no overstatement to suggest that if the mothers of some or other of those doomed infants had attended the Ante-Natal Clinic, and had submitted themselves to the direction, teaching, and guidance there ready at their disposal, their infants would have survived, instead of, as they do, figuring to-day as mortality statistics in a Report such as this. It must, after all, be indeed poor consolation for the drowning person who, on going down for the third and last time, mutters defiantly “ I don’t believe in lifebelts.” I am fully aware that elsewhere in this Report I state that, during 1939, some three out of every four expectant mothers were in Clinic attendance, a matter, undeniably, for satisfaction and encouragement, but that does not by any means necessarily imply that each and all of such women were in **regular** attendance. This is a course of tuition in an involved, difficult, and complex subject, which, for successful issue, calls for systematic, unbroken and, let me add, self-denying, attendance and devoted effort, and, further, that mere attendance is not, in itself enough—we must have understanding of the lessons taught, as well as studied and determined application of such lessons.

The Black List.

Clinic non-attenders may perhaps be placed in one of two categories; (a) the Doubters and (b) the Sceptics and Disbelievers, and I might, with justification, add a third group—the Indifferent, those who, mentally, are so inherently lazy that they can’t, or won’t, bother themselves. For the honest doubter there is hope, for he or she who doubts is on the threshold of discovery, and ultimate belief, but for the rank and crass unbeliever there is none, for to such the door of redemption and of ultimate salvation is locked, bolted and barred and, let me further add, for the benefit of the lazy and slothful ones, that they find themselves catalogued midway between those two classes. Of one thing at least I am very sure, and it is that, knowing as one does that means of rescue are ready at hand for the taking, one cannot contemplate this annual cataclysm of infant sacrifices without an overwhelming sense of wrath and just anger. I do not for a moment suggest that if all expectant mothers

were even regular Clinic attenders, infant mortality would cease to be, for, despite it all, it is true as ever that man is mortal, and therefore cannot wholly escape the risks of mortality and, from the implications of this axiom, newly born babies, of whatever quality, are, in the very nature of things, assuredly not exempt, but I do, in all seriousness say, and do mean, that the ranks of the victims would, thereby, be appreciably thinned and attenuated.

Human Salvage.

As salvage is one of the live topics and questions of the moment, let me, as a generalisation, submit that the two most urgent Child salvage problems of the day, the implementation of which would go far to confer upon those innocents a Charter of comparative safety and security in the strenuous battle of life, are :—

- (1) Immunisation against Diphtheria, probably the most deadly menace to child life to-day, and
- (2) Ante-Natal care and supervision.

Whilst, as regards the former, we must needs wait until the child is presented to us, safe and sound at, say, one year, there can, as regards the other, be not a moment's delay—we must get to work from the moment the child becomes a living entity, and that means, literally, the period of conception, and, for success in this most humane and transcendently vital of all redemption efforts, we must—that is an absolutely indispensable essential—have the free consent and whole-hearted co-operation of the mother-to-be.

Never in our history, let me remind you, was child life so valuable as it is to-day.

Such is the lesson, plain, stark, and irrefutable, which stares us in the face when we study a Table of mortality such as the one I shall now submit, and from whose implications there is not, nor can be, any escape, nor, as regards the dire effects of which, let me add as a last minatory warning, can there be much, if any, hope of undoing—and that perhaps, after all, is the real tragedy.

TABLE 6
DEATHS OF INFANTS UNDER ONE YEAR.

Cause of Death.	Under 1 wk.		1-2 weeks.		2-3 weeks.		3-4 weeks.		1-3 mths.		3-6 mths.		6-9 mths.		9-12 mths.		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Congenital Debility and Premature Birth	7	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	7	3
Broncho-Pneumonia	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	2	0
Melaena Neonatorum	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Cervical Meningocele	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
	8	4	0	0	1	0	0	0	0	0	0	0	1	0	0	0	10	4

The two following small tables are well worthy of careful notice. One deals with the matter of stillbirths—arising, as such conditions do, from causes identical with those which bring about infant mortality—and the other deals with neo-natal deaths—that is, deaths occurring during the first four weeks after birth.

TABLE 7a.

**DETAILS OF STILL-BIRTHS
FOR THE PAST FOUR YEARS.**

Year.	No. of Live Births.	No. of Still-births.	Proportion of Still-births per 100 Live Births.
1936	227	7	3.08
1937	351	6	1.7
1938	339	17	5.0
1939	330	12	3.6

TABLE 7b.

**DETAILS OF NEO-NATAL
DEATHS FOR THE PAST
FOUR YEARS.**

Year.	No. of Live Births.	No. of Neo-Natal Deaths.	Proportion of Neo-Natal Deaths per 100 Live Births.
1936	277	11	4.8
1937	351	24	6.8
1938	339	19	5.6
1939	330	14	4.2

I now wish to direct your earnest attention to a table referring in detail to mortality in children under five years of age, the particulars being classified in age groups.

TABLE 8.

DEATHS OF CHILDREN UNDER FIVE YEARS. IN AGE GROUPS.

CAUSE OF DEATH.	Under 1 yr.		1-2 years.		2-3 years.		3-4 years.		4-5 years.		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Congenital Debility and Premature Birth ..	7	3	0	0	0	0	0	0	0	0	7	3
Broncho Pneumonia ..	2	0	0	0	0	0	0	0	0	0	2	0
Melaena Neonatorum ..	1	0	0	0	0	0	0	0	0	0	1	0
Cervical Meningocele ..	0	1	0	0	0	0	0	0	0	0	0	1
Tubercular Meningitis ..	0	0	1	1	0	0	1	0	0	0	2	1
Acute Encephalitis Convulsions ..	0	0	0	0	0	0	1	0	0	0	1	0
Convulsions (Acidosis) ..	0	0	0	0	1	0	0	0	0	0	1	0
Diphtheria ..	0	0	0	0	0	0	0	0	1	0	1	0
Severe anæmia resulting from hæmorrhage ..	0	0	0	0	0	0	0	0	1	0	1	0
TOTAL ..	10	4	1	1	1	0	2	0	2	0	16	5

This is a table which, in its grave and serious import, is second only in importance to the one regarding which I have commented above. Let us, whilst conning this Table over and studiously scrutinising its message and suggestiveness, keep clearly and firmly in mind the culminating and conclusive fact that, by the time a child attains the age of five years, the foundation-laying period has passed—the period of plastic moulding—and we are now about to build and erect on foundations ill or well laid in earlier life. It is almost permissible to say that what the child is at five or six years of age, so is the ultimate man or woman likely to be. That may not be true literally, for it is not yet too late for attempts at patching, at cobbling and tinkering, but it is true to a degree not commonly dreamt of. Keep that thought obstinately in mind whilst studying the Table in question and you may be successful in extracting from it a meaning and significance which may quite possibly hitherto have wholly escaped you.

ANTE-NATAL CLINICS AND MATERNAL WELFARE.

I will now submit three tables giving particulars relative to the activities of the Ante-Natal Clinic during the year.

TABLE 9.

DETAILS OF ATTENDANCES AT ANTE-NATAL CLINIC DURING 1939.

Clinic.	Total No. of Expectant Mothers Attending.	Primiparae	Multiparae.	No. of Sessions held.	Average attendance per session.	Gross total of Attendances.	Percentage of notified births in Clinic attendance.
Rothwell	270	104	166	52	17·55	913	74·57
Methley	33	16	17	12	6·1	74	
TOTALS	303	120	183	64		987	

TABLE 9a.

PERIOD OF PREGNANCY AT WHICH FIRST ATTENDANCE (1939) TOOK PLACE.

1st month	2nd month	3rd month	4th month	5th month	6th month	7th month	8th month	9th month	Total.
4	17	32	49	58	67	51	21	4	303

NOTE.—Where women reside a mile or more from the Clinic, transport expenses are paid by the Authority.

TABLE 10.
PARTICULARS OF CASES ADMITTED TO MATERNITY HOSPITAL
DURING 1939.

Elderly Primi- para (admitted on account of age).	Cæsarian Section.	Cardiac Disease.	Hydramnios.	Eclampsia and Sterilisation.	Ante-Partum Hæmorrhage.	Bad Housing.	Albuminuria (Ante-Natal Treatment only).	Prolonged Labour.	Placenta Prævia and Cæsarian Section.	Toxæmia of Pregnancy.
1	1	2	1	1	2	3	1	1	2	1
Threatened Albuminuria.	Disproportion.	Hyperemesis.	Failed Forceps, High Forceps, Torn Cervix and Blood Transfusion.	Contracted Pelvis requir- ing Cæsarian Section and Sterilisation.	Cellulitis of Leg, and Confinement.	Pelvic Deformity.	Albuminuria and Induction.	Albuminuria. (1 died 1 hour after admission)	Premature Labour and Retained Placenta.	Pre-Eclampsia.
2	3	1	1	1	1	2	1	4	1	3
Incomplete Abortion.	Eclampsia. (1 died same day as admis- sion).	Severe Vaginal Discharge.	Ante-Partum Hæmorrhage and Dis- proportion.	Failed Forceps.	Contracted Pelvis (Tubal Induction).	Decompensated Cardiac Con- dition and Hyperpiesis.	Hydrocephalus and Craniotomy.	Threatened Abortion.	Hyperpiesis.	Total.
4	3	1	1	1	1	1	1	2	1	52

Maternal Mortality Rate.—During 1939, two maternal deaths occurred in this area, one of which occurred in Hospital, and was due to eclampsia, the other, which occurred at home, being due to Pulmonary Embolism.

The District Maternal Mortality Rate for the year was, therefore, 5.26 per 1,000 births, the average yearly Maternal Mortality Rate in this district, for the five years' period, 1935 to 1939 inclusive, being 3.64.

HEALTH ADMINISTRATION.

Laboratory Facilities.—No change during the year under review. I must here, on behalf of the Rothwell Urban Council, express our profound thanks for the much valued and greatly appreciated services, so generously rendered by Dr. Potts, the County Medical Officer of Health, and his laboratory staff, with regard to bacteriological examinations and other kindred work.

Ambulance Facilities.—(a) For Infectious Disease. (b) Non-Infectious Disease and accidents. An approved scale of charges is in operation for the latter.

Nursing Provision.—Voluntary Nursing Association, with staff of three Nurses, who, by arrangement, nurse in the home, on request, cases of Infectious Disease of a type not eligible for treatment in the Rothwell Isolation Hospital.

Treatment Centres and Clinics, including Clinics used solely for diagnosis or consultation :—

- (a) Five Welfare Clinics ; one, the Central Clinic at Rothwell and one each at Stourton, Lofthouse, Methley and Oulton.
- (b) Ante-Natal Clinic held weekly at the Central Clinic, and monthly at the Methley Clinic.
- (c) Post-Natal Clinic held weekly at the Central Clinic.
- (d) Staff of three Health Visitors, one being the Supervisory Head.
- (e) Panel of Home Helps.

No changes have been made in the above services during 1939.

Hospitals—Public and Voluntary.—The Council maintains its own Hospital for the isolation and treatment of Infectious Disease.

WATER SUPPLY.

The water supply for the district has been obtained in the following amounts from the under-mentioned Local Authorities during the year :—

Leeds Corporation	..	..	183,530,000 gallons.
Morley Corporation	..	..	27,045,000 „
Wakefield Corporation	..	..	24,731,000 „
			<hr/>
			235,306,000 „
			<hr/>

Of this quantity, 100,201,000 gallons were used for trade purposes and the balance of 135,105,000 gallons was allocated to domestic purposes and leakage respectively.

The average daily consumption per head for domestic purposes was 15.30 gallons and, for trade purposes, 11.18 gallons.

Drainage and Sewerage.—No changes have been made in the drainage and sewerage systems in this area during the year.

Rivers and Streams.—No action necessary during the year.

Closet Accommodation.—During 1939, the work of Privy Conversion has proceeded, and 13 privies and 2 closets other than privies were abolished and replaced by washdown Water Closets. The ashpits connected to the privies were also closed and galvanised dustbins provided in their stead. For details of Conveniences see Sanitary Inspector's Report.

Public Cleansing.—Details as set out in the Sanitary Inspector's Report.

Shops and Offices.—No action has been found necessary under the Shops Act, 1934, and under the Public Health Act, 1936, although inspection of shops has been carried out.

Camping Sites.—See Sanitary Inspector's Report.

Smoke Abatement.—Details of smoke observations, etc., will be found in the Sanitary Inspector's Report. At one large Bye-Product Works in the area, co-operative action has been taken and the boiler fires were altered to provide better combustion.

Swimming Baths and Pools.—No public baths in the area. One privately owned swimming bath was being fitted with improved purification plant and was not available for use during 1939.

Eradication of Bed Bugs.—All disinfestation is carried out by the Local Authority. The property and effects of Slum Clearance tenants are disinfested before transfer to new houses regardless of whether bed bugs are found or not.

Educational and co-operative steps are taken by the Health Department and the Housing Department of this Council to prevent infestation or re-infestation.

Schools.—No action necessary in connection with the sanitary condition or water supply of schools.

Inspection and Supervision of Food.—Normal routine work has been carried out during the year with regard to milk, inspection of farms and dairies, meat and other foods. For details see Sanitary Inspector's Report.

HOUSING.

The effect of previous years' work in Housing inspection and representation is now becoming apparent, and the details given below give positive proof of what has been done. No new Clearance Areas were represented during 1939, but four houses were represented as individual unfits.

Clearance Areas.

Houses demolished in 1939 but vacated prior to 1939	9
Houses vacated but not demolished in 1939	102
Houses vacated and demolished in 1939	34

Individual Unfit Houses.

Houses demolished in 1939 but vacated prior to 1939 ..	7
Houses vacated but not demolished in 1939	8
Houses vacated and demolished in 1939	3
Houses represented in 1939	4

Details of housing inspection and repairs required to be done during 1939 will be found in the tables in the Sanitary Inspector's Report.

The following Tables are self-explanatory.

TABLE 11.

**PROGRESS MADE IN SLUM CLEARANCE WORKS.
HOUSING ACTS, 1930-36.**

INDIVIDUAL UNFIT HOUSES.

No. of Demolition Orders made.	No. of houses demolished.	No. of houses vacated but not yet demolished.	No. of persons displaced.	No. of undertakings accepted.			Total No. of persons displaced.
				To Repair.	Not to use for human habitation.	Persons displaced.	
81	46	16	161	1	18	64	225

CLEARANCE AREAS.

No. of Areas.	Houses involved.	Persons affected.	No. of houses demolished.	No. of houses partly demolished.	No. of houses vacated but not yet demolished.	No. of houses repaired.	No. of houses transferred to Section II.
28	178	601	41	18	89	5	2

No. of houses still occupied 23

No. of persons displaced 559

TABLE 12.
SHOWING NO. OF NEW HOUSES ERECTED SINCE 1920.

Erected by	No. of new houses erected during 1939.			No. of houses erected since 1920.		
	State Aided	Without State Aid.	Total 1939.	State Aided.	Without State Aid.	Total 1920- 1939
Local Authority ..	6	0	6	704	30	734
Private Enterprise ..	0	115	115	124	865	989
Totals ..	6	115	121	828	895	1,723

TABLE 13.
HOUSING ACTIVITIES DURING 1939.

No. of Houses Inspected.			No. of Visits made.		
Under Housing Act.	Under Public Health Act (Minor defects)	Total	Under Housing Act.	Under Public Health Act.	Total
415	680	1,095	522	992	1,514

Informal Notices.		Statutory Notices.		Houses Repre- sented as Clearance Areas.
No. issued.	No. completed.	No. issued.	No. completed.	
265	257	11	11	150

141 houses were inspected by the Housing Inspector, with a view to Slum Clearance, of which 109 were subsequently visited by the Medical Officer of Health.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE.

The record of notifiable infectious disease in this area during 1939, reduced to statistical relation in the subjacent table, is not one which, on its merits, calls for any lengthy or detailed comment on the present occasion. It has been, on the whole, a definitely "quiet" year. A survey, however, of the Table in question reveals at least one factor which is, perhaps, worthy of passing mention, and it is that the number of notified cases of proven "Positive" Diphtheria is gratifyingly low, no more, as a matter of fact, than seven—with but one death—out of a population of 24,540. Here, I think, we find ample and irrefutable justification for the Immunisation assiduously carried out in this district during recent years, and to which statistical reference is made a little further on. There can, I think, be but little doubt, judged by the searching test of experience, as well as by factual records, that Immunisation, carried out to its logical conclusion of 100 per cent. of immunised under-five years' children, thus ensuring a corresponding 100 per cent. tally of "protected" school-children, points unerringly to the path which must be travelled if the desired goal, as indicated by the eventual extinction of Diphtheria, with its inevitable and distressing mortality, is ultimately to be reached. We, in this area, are fully alive to the vital significance of this fact, and it may be accepted without qualification that neither time nor effort is being spared, nor will, in the immediate future, be spared, in the endeavour to ensure this greatly to be desired result.

DIPHTHERIA CAN BE ABOLISHED.

To talk of abolition of Diphtheria may sound like a fantastic and impracticable dream, so accustomed have we, from use and wont, become to its never-failing presence as a devastating factor in our midst, but it is a dream, none-the-less, which can, and will, be transformed into a reality, provided that two essential factors as relating to Immunisation are permitted to pull their full weight, and thus to confer the consequent and much to be desired safety and protection.

This, in the first place, premises that the controlling administrative Authority, will, in season and out of season, continue to exercise relentlessly every scintilla of its power and authority, will continue in increasing measure to offer facilities and do everything in its power to induce acceptance of them and, not least important, will demonstrate that individually, no less than collectively, they are convinced and whole-hearted believers and not merely passive acceptors—in a word, that they are protagonists, and zealots at that.

The second requisite is the *in toto* eradication from the minds of parents of young children of a welter of ignorance and prejudice regarding Immunisation which still, to a truly lamentable degree, holds sway, and the supplantation of a genuinely confirmed belief that, in this protective action, they have at hand a sure defence against attack upon their children by one of the deadliest and most merciless child diseases of the present day.

A Place and Time for Plain Speaking.

It is, in particular, this laggard and recalcitrant attitude on the part of still far too many parents, this blindly obstinate, indeed exasperating, refusal to accept plain and overwhelmingly logical facts, based, as this attitude so often is, not upon sane and informed judgment but upon nothing more substantial than stupid and unreasoning prejudice, which continues to slow down the rate of revolution of the Immunisation wheel and which, at the same time, gives to Diphtheria a latitude of which, for its own fell purposes, it takes unlicensed advantage and which, furthermore, condemns countless young children to grave and imminent risks, assuredly not excluding that of mortality, from the evil effects of which, by the exercise of ordinary intelligence and common sense on the part of their parents, they would be largely immune. That is a hard thing to say, but it is true, none-the-less.

The only seeming remedy lies in unremitting and vigilant efforts at the proselytism of the unheeding and the endeavour to convince all parents, beyond the bounds of question or doubt, that to have their young children Immunised is not a mere formal submission to official and autocratic decree, but is, in strict fact, a supreme duty, with incalculable effects upon their whole future safety and security and even lives.

Perhaps a passing word concerning the impressive tally of 48 cases of notified Pneumonia will not be out of place. This unusually high figure may, on the one hand, indicate—I think it does—that a greater proportion than formerly of cases of Pneumonia actually occurring are notified and, in the second place, raises acutely, once again, the vital factor of Housing Reform, with ruthless eradication of slum and low grade property of every kind. This is indeed an old story, oft-times before stressed and emphasised, and the moral to be educed therefrom is likewise as old and threadbare as it is obvious and menacing.

On the present occasion, judged by recorded figures of incidence, no other item in the Infectious Diseases Notification Table calls for any detailed commentation, and the figures, now presented, should, I think, be found to be self-explanatory.

TABLE 14.

**CASES OF NOTIFIED INFECTIOUS DISEASES IN AGE GROUPS.
(EXCLUDING TUBERCULOSIS).**

Disease.	Under 1 yr.	1-2 yrs.	2-3 yrs.	3-4 yrs.	4-5 yrs.	5-10 yrs.	10-15 yrs.	15-20 yrs.	20-35 yrs.	35-45 yrs.	45-65 yrs.	Over 65 yrs.	Total.
Smallpox ..	—	—	—	—	—	—	—	—	—	—	—	—	0
Scarlet Fever ..	0	1	2	4	7	39	13	5	5	1	0	0	77
Diphtheria ..	0	0	0	0	1	2	0	1	3	0	0	0	7*
Paratyphoid B. ..	0	0	2	0	0	0	0	0	3	0	0	0	5
Puerperal Pyrexia ..	0	0	0	0	0	0	0	0	5	0	0	0	5
Pneumonia ..	1	2	2	1	0	3	3	3	8	5	15	5	48
Ophthalmia Neonatorum ..	4	0	0	0	0	0	0	0	0	0	0	0	4
Erysipelas ..	0	0	0	1	0	0	1	1	3	2	5	5	18
Tubercular Meningitis ..	0	1	0	0	0	0	0	0	0	0	0	0	1
Measles ..	0	0	1	0	1	5	1	0	0	0	0	0	8
Whooping Cough ..	1	1	0	0	3	0	0	0	0	0	0	0	5
German Measles ..	0	0	0	0	0	1	1	0	0	0	0	0	2
TOTAL ..	6	5	7	6	12	50	19	10	27	8	20	10	80

* 20 Cases of suspected Diphtheria also notified, but proved "Negative."

The following table shows the particulars of the incidence of notifiable diseases (other than Tuberculosis) in this area during 1939.

TABLE 15.

Disease.	Total Cases Notified.	Cases admitted to Hospital.	Total Deaths.
Smallpox	0	0	0
Scarlet Fever	77	60	0
Diphtheria†	7	7	1
Enteric Fever (including Paratyphoid)‡	5	5	0
Ophthalmia Neonatorum	4	2	0
Puerperal Pyrexia	5	1	0
Pneumonia	48	3	12
Erysipelas	18	1	0
Measles	8	0	0
Whooping Cough	5	0	1
German Measles	2	0	0
Tubercular Meningitis	1	1	1
TOTAL	184	80	15

† 20 Cases of suspected Diphtheria were also notified and admitted to Hospital, all proving to be "Negative." Of the above 7 positive cases, one was removed to Seacroft Hospital, Leeds and one to Garforth Hospital.

‡ All these cases were Paratyphoid "B," one being removed to Leeds General Infirmary and four to the Rothwell Isolation Hospital. All cases were of a mild and sporadic character.

TABLE 16
IMMUNISATION RECORDS, 1939.

1-2 years.	2-3 years.	3-4 years.	4-5 years.	5-10 years.	10-15 years.	Over 15 years.	Total.
45	19	17	16	15	2	—	114

TUBERCULOSIS.

No action was found to be necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from pulmonary tuberculosis employed in the milk trade), or under Section 172 of the Public Health Act, 1936 (relating to the compulsory removal to hospital of persons suffering from tuberculosis).

TABLE 17.
NEW CASES AND MORTALITY DURING 1939.

Age Periods.	NEW CASES.				DEATHS.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year ..	0	0	0	0	0	0	0	0
1-5 years ..	0	0	0	1	0	0	2	1
5-15 years ..	0	0	0	4	0	0	0	0
15-25 years ..	5	3	1	3	1	4	1	0
25-35 years ..	3	5	0	0	1	2	0	0
35-45 years ..	2	1	1	0	1	0	0	0
45-55 years ..	2	1	0	0	0	1	0	0
55-65 years ..	1	1	0	0	0	0	0	0
65 and upwards	0	0	0	1	0	0	0	0
Totals ..	13	11	2	9	3	7	3	1

Of the fourteen deaths due to tuberculosis, two were un-notified, giving a ratio of 1 in 7 of non-notified tuberculosis deaths to total tuberculosis deaths.

ISOLATION HOSPITAL.

The gratifying, and continued, diminution of Diphtheria admissions has already been commented upon, and in this connection it may further be emphasised that, without exception, **every** case of notified Diphtheria occurring in the entire area, as well as **every** case of the suspect or observation type, for which admission was requested, were admitted to Hospital, no solitary case in either category having been kept outside during the entire year.

How disproportionate were the demands made upon our bed accommodation by what were ultimately proven, clinically and bacteriologically, to be "negative" cases, may be gleaned from a study of the subjacent tables, which disclose the arresting fact that, during 1939, no less than 65 per cent. of the gross Diphtheria admissions to our Wards were, after exacting scrutiny, placed in the "negative" class.

One Diphtheria death occurred during the year ; two further deaths, one from Tubercular Meningitis and one from Pneumonia, were likewise recorded, thus presenting a general Hospital death rate of 2.90 per 100 cases discharged.

Full Adequacy of Provision Guaranteed.

The tables here appended should, of themselves, afford a clear and concise picture of the work carried out by the Isolation Hospital during the year. It is only necessary to add by way of comment that the year as a whole was a light one and that at no time was there any notable rush of admissions or any undue pressure upon our bed space. Once again, our experience in 1939 permits it to be stated that the bed provision was at no time extended throughout the year, and that the Isolation Hospital proved itself to be fully capable, and with room to spare, of affording bed accommodation for the full needs of the district which it serves and, further, it may with certainty be claimed that the Hospital, as at present constituted can, with efficiency and without difficulty, offer bed provision, of variant kinds, considerably beyond the proved district requirements of 1939.

Finally, it only remains for me to pay a well-merited tribute to the Matron and her nursing staff for the most thorough, conscientious and, beyond all question, able and efficient manner in which at all times during the year they have fulfilled their onerous and most responsible duties.

TABLE 18.

Showing the number of Admissions and Discharges of Patients sent in by the various Wards, during the period January 1st to December 31st, 1939.

Ward.	No. of cases in Hospital at end of 1938.	No. of cases admitted during 1939.	Total No. of cases actually in Hospital during 1939.	No. of cases discharged during 1939.	Deaths during 1939.	No. of cases in Hospital at end of 1939.	Total.
North	3	17	20	17	3	0	20
South	0	10	10	10	0	0	10
Stourton	3	10	13	13	0	1	13
Lofthouse-with-Thorpe ..	2	29	31	30	0	1	31
Carlton	2	22	24	24	0	0	24
Oulton	0	2	2	1	0	1	2
Woodlesford	0	2	2	1	0	1	2
Methley	0	8	8	8	0	0	8
Leeds Public Assistance Committee	0	0	0	0	0	0	0
West Riding C.C. (Oulton Hall)	0	0	0	0	0	0	0
TOTAL	10	100	110	103	3	4	110

TABLE 19.

Showing net number of Admissions after deduction of NEGATIVE Cases of Diphtheria.

Gross Total admissions (All Diseases) during 1939.	Negative Cases of Diphtheria	Net admission figure.
100	20	80

TABLE 20.

Showing particulars of cases of Admission during 1939.
(Including NEGATIVE Cases of Diphtheria.)

	Scarlet Fever.	Paratyphoid B.	Diphtheria.	Puerperal Pyrexia.	Pneumonia.	Erysipelas.	Ophthalmia Neonatorum.	Tubercular Meningitis.	TOTAL.
Males ..	37	2	10	0	2	3	2	0	56
Females ..	23	2	15	1	1	0	1	1	44
TOTAL ..	60	4	25	1	3	3	3	1	100

TABLE 21.

Showing particulars of cases of Discharge during 1939.

	Scarlet Fever.	Paratyphoid B.	Diphtheria.	Puerperal Pyrexia.	Pneumonia.	Erysipelas.	Ophthalmia Neonatorum.	Tubercular Meningitis.	TOTAL.
Males ..	38	2	11	0	1	3	2	0	57
Females ..	26	2	15	1	1	0	1	0	46
TOTAL ..	64	4	26	1	2	3	3	0	103

Mortality Rate.—Three deaths were recorded during 1939, one due to Diphtheria, one to Pneumonia and to Tubercular Meningitis, thus giving a general Death Rate for the Hospital of 2.90 per 100 patients discharged.

A Word of Acknowledgment.—Before finally closing my Report, I feel it my duty to pay a well deserved tribute by putting on record my great indebtedness to Mr. Wilson, Senior Sanitary Inspector, and his Staff, for the never-failing and loyal assistance and backing they have afforded me, as Medical Officer of Health, throughout the year. To the most able and efficient manner in which, at all times, they have carried out their varied and exacting duties, no less than, at the same time, to their whole-hearted and generous co-operation and support, for which I now offer my sincere and

profound thanks, the major part of whatever success the Health Department may have attained during the year must be justly ascribed.

In conclusion, I should like to convey to the Chairman and members of the Council and, in particular, to the Chairman and members of the Health Committee, the Isolation Hospital Committee, and the Maternity and Child Welfare Committee, my appreciation of the generous help and support they have, at all times, afforded me during the year.

I beg to remain, Gentlemen,

Yours faithfully,

HUGH STEVENSON,

Medical Officer of Health.

Rothwell, 1940.

ANNUAL REPORT

OF THE

Senior Sanitary Inspector and Cleansing Superintendent, for the year 1939.

To the Chairman and Members of the
Rothwell Urban District Council.

GENTLEMEN,

In presenting to you my Eighth Annual Report, for the year 1939, I am impelled to follow the instructions of the Ministry of Health and the example of the Medical Officer of Health, and make my comments as brief as is consistent with clarity.

The trend of events during 1939 is now history, and the intrusion of Air Raid Precautions work, once regarded as a nuisance, is now accepted as inevitable, but it cannot be overlooked that this intrusion has interfered more and more with the routine of our daily work. From my appointment in 1938 as Air Raid Precautions Officer to this Council, it has fallen to my lot to organise and draw together the various sections of the Air Raid Precautions Services and foster them until such time as their virility allowed them to become self-supporting and self-controlling.

As for the ordinary Departmental work, this was carried on in spite of other matters which needed our attention, and the delay in the work was unavoidable. In the main, the work was routine and devoid of the glory of Clearance Area procedure, although, but for the outbreak of war in September, other Areas would have been Scheduled and Represented.

The twenty-two areas, comprising 150 houses, which were the subject of an Inquiry in 1938, were, in the early part of 1939, confirmed without material alteration.

The statistical details relative to Housing, which are appended in lieu of the customary tables, show, by comparison with the previous year's figures, how this work has suffered. Even so, the figures are commendable, equalling, as they do, 4 primary house inspections every working day in the year. The number of notices served and complied with during the currency of the year, proves that the work is carried out, without much delay, to finality.

HOUSING STATISTICS.

No. of dwelling-houses inspected under the Housing Acts ..	1,095
Total number of inspections made under Public Health and Housing Acts	1,514
No. of Preliminary Notices served	265
No. of Ashpits converted	158
No. of dustbins provided in lieu of ashpits	384
No. of Notices complied with during 1939	257
No. of Legal Notices (Housing) served under Section 9 of the Housing Act, 1936	11
No. of above Notices complied with	11
No. of Legal Notices (Public Health) served	17
No. of above Notices complied with	17
No. of houses represented under Section 11 of the Housing Act, 1936	4

Nuisances.—These, as aforetime, continue, 297 being reported during the year. The tendency is for the number to diminish, which, I hope, arises from the education of the householder.

Tents, Vans, Sheds, &c.—A Licence granted to the owner of the Feast Ground, has provided a solution to the difficulties previously experienced and the control of this camping ground is now sufficient. Other itinerant bodies of van dwellers visit this area occasionally, without causing nuisance. There was a slight increase in the number of vans towards the end of the year, owing to a Ministry Order prohibiting the use of such dwellings within 15 miles of the East Coast.

REFUSE COLLECTION AND DISPOSAL.

This work has continued without material change, the vehicles and type of disposal being as previously. Salvage has developed and, during 1939, the figures were as follows:—

Paper	12 tons, 6 cwts. ..	£12 6 0
Tins	46 ,, 11 ,, ..	£17 8 9
Glass	6 ,, 14 ,, ..	£7 7 6
Sorted glass (jars and bottles) ..	30 gross ..	£6 16 6
		<hr/>
		£43 17 9
		<hr/>

Sanitary Conveniences.—Continuing our policy of Ashpit removal, the necessary inspections and notices were made, which resulted in 158 ashpits being abolished and 384 ashbins provided in their stead.

MILK AND DAIRIES.

The following list gives the details of the Registrations under the Milk and Dairies Orders in this Area :—

No. of persons registered as Retail Purveyors of Milk..	85
No. of Cowkeepers	38
No. of premises registered as Dairies	58
No. of Accredited Milk Licences	2
No. of Supplementary Licences under the Milk (Special Designations) Order	8

The Council decided not to apply for powers to preserve their rights of sampling, which, under the provisions of the Food and Drugs Act, 1938, were taken over by the West Riding County Council, and the County Council now exercise the power of routine milk sampling. The Officers of the Health Department have, however, still power to take samples of milk if, for any reason whatever, they desire to do so.

The County Council, in the exercise of their powers of sampling have not, as yet, advised this Department of samples they have taken, or action in connection therewith. Such a course would, I think, be very desirable.

Meat Inspection.—Six Licensed, and two Registered, Slaughter Houses operated during the year ; the details of inspections and condemnations of meat are given below.

A scheme to review the Slaughter Houses at the end of the year had to be postponed, *sine die*, as the slaughtering of meat became centralised, and was taken from our Area. Issue of Licences under the Food and Drugs Act, 1938, will, therefore, be postponed until the local Slaughter Houses are again required, at which time the matter will be started at the point where it had to be thus terminated.

MEAT INSPECTION DURING 1939.

No. of visits.	Beef.	Mutton.	Pork.	Veal.
47 ¹	437	577	424	19

MEAT CONDEMNED DURING 1939.

Diseases						Weight in lbs
Tuberculosis	..	..	..	..	..	1,945
Cirrhosis	..	..	..	..	..	64
Bruising	..	..	..	..	..	30
Septicaemia	..	..	..	..	..	900
Actinomycosis	..	..	..	..	..	37
Necrosis	..	..	..	..	..	17
Oedema	..	..	..	..	..	84
Angioma	.	.	..	..	..	14
Abscesses	..	..	..	..	..	59
Total weight of meat condemned ..						<u>3,150 lbs.</u>

Offensive Trades.—No nuisances have arisen from Fish Frying or from the Oleine Works, which comprise the whole of our Offensive Trades in this Area.

Petroleum.—37 Licences to store 1,705,550 gallons of petroleum spirit, were issued during the year. The requirements of the Petroleum Acts are strictly enforced and no trouble has arisen in this branch of the work.

Disinfection and Disinfestation.—A small Table is given below which shows the details of this work. No material change has taken place in the principles of disinfection and the methods of operating.

Details of Disinfestation during 1939.

	Council Houses.	Slum Clearance Houses	Other Houses.	Total.
No. of houses found to be infested ..	13	109	19	141
Number disinfested ..	13	109	19	141

	Disinfector Gaseous Blocks (Lawes')	Spray. (Zaldecide.)	Total.
Methods Employed	121	20	141

With regard to disinfection, 124 houses were disinfected by Formalin following the notification of cases of Infectious Disease. In addition, the clothing of 5 notified cases of Scabies was steam disinfected and the premises disinfected with sulphur.

I have now to bring this very meagre report to a close and although the text is brief, it will be gathered that the work is not.

My thanks are due to the individual members of the staff and the Council, and are still accorded with the fullness of previous years.

I am, Gentlemen,

Your obedient Servant,

THOS. WILSON.

Rothwell,

January, 1941.

